FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEVED

2848 MAY 22 AM 8: 17

				Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M	5
BELLEF IN	LIFE AND L	I BERTY POL	11, 1, 1, 4	TH AGTILON
COMMITTEE	(BILL'S PA	(sc)		
ADDRESS (number and street)	18,0, B.0x, 53	506		
(Check if address is changed)	ROLAND		OH	445141-
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDR	RESS (Please provide only one e	e-mail address)		
(Check if address	PERRYCBI	44. John Son 448	- 100A	GOM
is changed)				
COMMITTEE'S WEB PAGE A	ADDRESS (URL)	• • • • • • • • • • • • • • • • • • • •		
(Check if address is changed)				
2. DATE 05'	02 ' 20 i 3			
3. FEC IDENTIFICATION	NUMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined	I this Statement and to the bes	st of my knowledge and belief in	t is true, correc	ct and complete.
Type or Print Name of Treasu	urer Perry	Chickonoski		
Signature of Treasurer	My	w	Date 5	5'02'2013
NOTE: Submission of false, em	•	n may subject the person signing TION SHOULD BE REPORTED W		o the penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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		DMMITTEE Committee:		
(a)		This committee is a principal campaign committee. (Complete the candidate information below.	.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate	
Name o	me of			
Candide Party A		Office Sought: House Senate President	State District	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name o Candida			<u> </u>	
Party	Com	mittee:		
(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.	
Politic	al Ac	ction Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:	
		Corporation Corporation w/o Capital Stock	Labor Organization	
		Membership Organization Trade Association	Cooperative	
		In addition, this committee is a Lobbyist/Registrant PAC.		
(f)	Ø	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party	
		In addition, this committee to a Lebbyist/Registrant PAC,		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint F	 Fundi	raising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.		
(h) [This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political	
(Comr	mittees Participating in Joint Fundraiser		
	1.			
		1		
;	2.	I I I I I I I I I I I I I I I I I I I		
;	3.	FEC ID number C		
	4.			

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٧	Vrite or Type Com		<u>. </u>
6.	Name of Any C	connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership	PAC Sponsor
B	11144 50	NHUSIOIN	
L			
	Mailing Address	511917474 57. 1111111111	
		MARNETTA I I OH USTS	0 -
		CITY STATE ZIP	CODE
	Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	ship PAC Sponsor
7.	Custodian of Rebooks and record	ecords: Identify by name, address (phone number optional) and position of the person in posses ds.	sion of committee
	Full Name	PERRY J. CHICKONOSKI	
	Mailing Address	15,7,50 CLINGAN RD	1111
		ISTRUTHERS OH 4447	<u>\</u>
	Title or Position	CITY STATE ZIP	CODE
	TREAS	UKER Telephone number 3,30-15	71-13545
8.		he name and address (phone number optional) of the treasurer of the committee; and the name agent (e.g., assistant treasurer).	and address of
	Full Name of Treasurer	PERRY J. CHUCKONOSKI	
	Mailing Address	15.7.50 C41 NGAN RD	
			1111
		STRUTHERS 10H 14447	<u>u-L</u>
	Title or Position		CODE

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	Full Name of Designated Agent	PATRICK O'GONNOR				
	Mailing Address					
		CITY	STATE	ZIP CODE		
	Title or Position	TANT TREASURER Telephone	number [3]	30-1956-19324		
9.	9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.					
		JPMORGAN GHASE BANK NA				
	Mailing Address	3999 BELMONT AVE				
			<u> </u>			
		YOUNGSITIONN	OH	4,4,505-L		
		СПҮ	STATE	ZIP CODE		
	Name of Bank,	Depository, etc.				
		1				
	Mailing Address	1	<u> </u>	<u> </u>		
						
			لناا			
		СПҮ	STATE	ZIP CODE		

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED

(3/2005)